



DEPARTMENT OF THE AIR FORCE  
HEADQUARTERS UNITED STATES AIR FORCE  
WASHINGTON DC

DEC 12 2003

MEMORANDUM FOR SEE DISTRIBUTION

FROM: HQ USAF/SGO  
110 Luke Avenue, Room 400  
Bolling AFB, DC 20032-7050

SUBJECT: Urgent Guidance on Influenza Control and Priorities for Vaccination

The nationwide increase in influenza cases and reports of severe complications, including deaths, has led to a higher demand for influenza vaccination than in previous years. The majority of our military force has been vaccinated and we have vaccinated a higher percentage of our high-risk beneficiaries than ever before. Due to the limited vaccine supply within AF and DoD, MTF commanders will implement the influenza control guidance below, which includes limiting influenza vaccination to high priority groups from now thru 31 December 03.

This policy guidance is consistent with Centers for Disease Control and Prevention (CDC) recommendations for influenza control during this nationwide influenza vaccine shortage. The Army and Navy medical departments will be providing similar policy guidance to their MTFs.

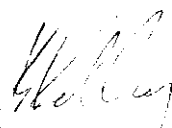
Guidance:

1. Thru 31 December 03, provide influenza vaccine to only these high priority groups:
  - a. Military members, including AD, ARC, trainee and recruit populations.
  - b. Individuals at high risk for complications from influenza to include healthy children aged 6-23 months, adults aged  $\geq 65$  years, pregnant women  $> 14$  weeks gestation, and persons aged  $\geq 2$  years with underlying chronic medical conditions.
  - c. Individuals at greatest risk for transmission of influenza to those at high risk. This includes healthcare workers performing direct patient care and household contacts of high risk persons.
  - d. In the event of a local outbreak, other persons may be vaccinated in accordance with recommendations from state/local public health authorities. Coordinate local response with the AF Epidemiological Service (AFIOH/RSRH) at DSN 240-3471.
2. Maximize coverage of high priority populations during the remainder of this month. Plan to offer remaining vaccine to low-risk beneficiaries beginning 1 January 04. We

will regularly review the status of vaccination coverage, vaccine supply, influenza disease activity, CDC recommendations, and will update this guidance as needed.

3. The Defense Logistics Agency has a very limited supply of influenza vaccine available for purchase. MTFs should order vaccine only if additional supply is required to cover high priority populations or for outbreak control.
4. AFMSA/SGPP will monitor the overall AF vaccine supply and may direct redistribution of vaccine to ensure every MTF has vaccine sufficient to vaccinate high priority populations or respond to outbreaks. MTFs will provide a report through logistics channels (AFMSA/SGSLC) on their end-of-week influenza vaccine supply. Weekly reports are due COB each Friday, now thru 30 January 04.
5. To further mitigate the risk of influenza and other respiratory illnesses, MDG commanders must ensure that healthcare personnel maintain appropriate respiratory hygiene such as wearing of masks when in close contact with patients with fever and respiratory illness and frequent hand washing. In addition, MTF providers should be familiar with the indications for use of antiviral medications as adjunct to influenza vaccine for controlling and preventing influenza infections. Guidance on the use of antivirals can be found in the *MMWR--Prevention and Control of Influenza*, 25 April 03, Vol 52, No. RR-8, <http://www.cdc.gov/mmwr/PDF/rr/rr5208.pdf>.
6. Educate all patients and staff on the importance of frequent hand washing, covering the mouth when coughing, and staying at home when ill with influenza-like symptoms, to reduce the spread of influenza infection.

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